

State of Maryland Executive Department

Application for Approval of Behavioral Interventions, Strategies, and Supports Training for Use in Residential Child Care Facilities In accordance with COMAR 14.31.06.15

SECTION I Organizational Information

Program Name		
Developer		
Address		
Employer ID #		
Contact Person		
Phone		
Email		
Please consider our application for the approval of the following training components (Check the appropriate boxes): Positive behavior interventions strategies and supports Functional behavior assessments and behavior treatment planning Time out Restraint		
SECTION II Training of Individual Staff		
1. Describe the philosophy of this program.		
2. What is the maximum trainer to trainee ratio?		
3. Does this program require trainees to pass a written test? YES NO		
a. If yes, what is the minimum passing score (percentage)?		

- 4. Does this program require trainees to demonstrate the ability to perform physical restraints? YES NO
- 5. Does this program require refresher training? YES NO
 - a. If yes, how often?
 - b. How many hours of refresher training are required?
- 6. Listed below are components of training required by the state. Provide a detailed description of how your program addresses each component and the number of training hours for each.
 - a. Identifying triggers of aggressive behavior
 - b. Methods for calming clients in crisis
 - c. Positive behavioral intervention strategies
 - d. Verbal de-escalation
 - e. Use of Time Out
 - f. Staff and client debriefing
 - g. Documentation requirements
 - h. Blocks and Releases
 - i. Take downs
 - j. Holds (prone restraint is prohibited)
- 7. Provide an explanation of any other program components not addressed in the items above.

SECTION III Training for Trainers

- 1. Does this program offer training of trainers? YES NO
- 2. What is the trainer to trainee ratio?
- 3. What proficiency measures are used?
- 4. Does this program require recertification? YES NO
 - a. If yes, how often?
 - b. What, if any, other requirements are there for recertification?
- 5. Listed below are components of training required by the state. Provide a detailed description of how your training of trainers program addresses each component and the number of training hours for each.
 - a. Identifying triggers of aggressive behavior
 - b. Methods for calming clients in crisis
 - c. Positive behavioral intervention strategies
 - d. Verbal de-escalation
 - e. Use of Time Out
 - f. Staff and client debriefing
 - g. Documentation requirements
 - h. Blocks and Releases

- i. Take downs
- j. Holds (prone restraint is prohibited)
- 7. Provide an explanation of any other program components not addressed in the items above.

SECTION IV Legal Information

- 1. Has this program ever been the subject of a civil lawsuit? YES NO
 - a. If yes, provide details.
 - If yes, was there a judgment or settlement against this program?
 YES NO
 - c. If yes, provide details.
- 2. Have individuals associated with this training ever been the subject of criminal charges? YES NO
 - a. If yes, provide details.
 - b. If yes, was there a conviction? YES NO
 - c. If yes, provide details
- 3. Are there any open investigations involving this training at the time of application? YES NO
 - a. If yes, provide details.
- 4. Has there ever been a serious injury or death associated with the use of this training?

 YES

 NO
 - a. If yes, provide details.

SECTION V Data Collection

1. Provide a list of states and agencies in which this training is currently provided in residential settings for children and youth.

Submit 8 copies of the following (via mail or email): application, training curriculum(s) and description/pictures of physical interventions

Please also complete and sign the verification checklist (final page of the application) and submit 1 copy along with your application package to:

Patricia E. Arriaza, Chief
Interagency Initiatives
Governor's Office for Children
301 W. Preston Street, Suite 1502
Baltimore, Maryland 21201
Or via email at patricia.arriaza@maryland.gov

Submission Schedule

Submission Due Date	Quarterly Review Date
December 15 th	January Panel Review
March 15 th	April Panel Review
June 15 th	July Panel Review
September 15 th	October Panel Review